



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: **George K. Strohmaier, et al.** Confirmation No. **6078**
Application No.: **10/716,292** Group No. **1621**
Filed: **November 18, 2003** Examiner **Deborah D. Carr**
For: **Calcium Salt Saponification of Polyunsaturated Oils**
Attorney Docket No. **P-22,888 E USA**

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on January 5, 2006.

Date January 5, 2006

Janet Hainz
Janet Hainz

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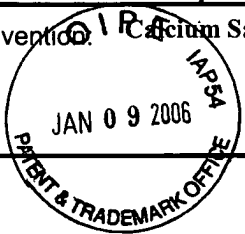
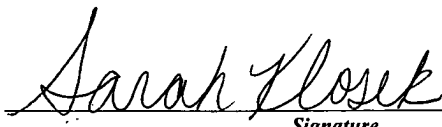
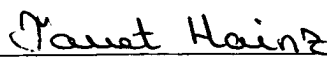
Sir:

In response to the outstanding Official Action mailed September 23, 2005, the enclosed claim amendments and remarks are being submitted by Applicants for consideration by the Examiner.

The **Listing of Claims** begins on page 2 of this paper.

Applicants' **Remarks** begin on page 8 of this paper.

AF/LEW

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. P22,888-E USA	
Applicant(s): George K. Strohmaier, et al.					
Application No. 10/716,292	Filing Date 11/18/2003	Examiner CARR, Deborah D.	Customer No. 23307	Group Art Unit 1621	Confirmation No. 6078
Invention: Calcium Salt Saponification of Polyunsaturated Oils					
 COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	63 -	63 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-5425 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
 _____ Signature			Dated: January 5, 2006		
Sarah Klosek, Esq. Reg. No. 55,332 Synnestvedt Lechner & Woodbridge, LLP P.O. Box 592 Princeton, NJ 08542-0592 Telephone: 609-924-3773 Fax: 609-924-1811			<div style="border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p><p style="text-align: center;">January 5, 2006 (Date)</p><p style="text-align: center;"> _____ Signature of Person Mailing Correspondence</p><p style="text-align: center;">Janet Hainz _____ Typed or Printed Name of Person Mailing Correspondence</p></div>		
CC:					